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00136 7590 07/07/2005

JACOBSON HOLMAN PLLC  
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WASHINGTON, DC 20004

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1909 K Street, N.W.  
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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/749,145

12/31/2003

Ho Young Kim

P69429US0-

3861

TITLE OF INVENTION: MODULATION FREQUENCY TUNABLE OPTICAL OSCILLATOR

10/07/2005 MBEYENE2 00000142 503121 10749145

Please change to "123034-05004793"

01 FC:2501 700.00 DA

02 FEE TYPE 300.00 DA SMALL ENTITY

nonprovisional

YES

\$700

\$300

\$1000

10/07/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
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SONG, SARAH U

2874

385-037000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☒ Revocation of Power of Attorney and New Power of Attorney

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Electronics and Telecommunications  
Research Institute

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Daejon-Shi, KOREA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee (\$700)  
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4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.  
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 503-121 (enclose an extra copy of this form).

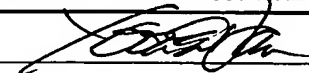
5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature



Date

October 5, 2005

Typed or printed name

Yoon S. Ham

Registration No.

45,307

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